LEU 32 5613 Benejved & jusbecred 1

CC Docket No. 02-6

"Request for Review"

No. of Copies rec'd_____(List ABCDE

Received & Inspected

To Whom it may concern:

FEH 05 2013

I had previously submitted this appeal via USPS to USAC at the following address:

FCC Mail Room

Letter of Appeal Schools and Libraries - Correspondence Unit 30 Lanidex Plaza West PO Box 685 Parsippany, NJ 07054-0685

I had mailed this on Friday, December 14th, 2012. It doesn't appear that USAC had ever received it. I also submitted it via online, since I had not heard back from USAC. It appears USAC only received the one I had submitted online. However, because I had already submitted the first one within 60 days, I didn't submit the second one in that time frame. Now, USAC denied my request for appeal (which was originally due to insufficient documentation) because of the time frame. I am sending this information to you with delivery confirmation. Please accept my request for review. Thank you!

Bryan Van Ruler

651.414.9562

bryan @ dakotaacademic.com

FEB 05 2013



260 Edmund Avenue St. Paul MN 55103 651 225 9177

preK-5

St. Paul MN 55103 651 225 9177 fax 651 225 9722 fax 651 487 7551

643 Virginia Street

FCC Mall Room

December 13, 2012

Letter of Appeal Schools and Libraries Division - Correspondence Unit 30 Lanidex Plaza West P.O. Box 685 Parsippany, NJ, 07054-0685

Dear Sir or Madam:

I am writing on behalf of St. Paul City School, located at 260 Edmund Avenue, St. Paul, MN, to appeal a Funding Commitment Decision that appears to be erroneous. My appeal relates to the following:

Billed Entity Applicant Name: St. Paul City School

Funding Request Number: 2376484 Form 471 Application Number: 855208

Contact Name: Kao Lee

Contact Phone Number: 651-925-3088

Contact Fax Number: n/a

Contact Email: kao@stpaulcityschool.org

Billed Entity Applicant Name: St. Paul City School

Funding Request Number: 2376731 Form 471 Application Number: 855209

Contact Name: Kao Lee

Contact Phone Number: 651-925-3088

Contact Fax Number: n/a

Contact Email: kao@stpaulcityschool.org

The reason given for the above denials are "Insufficient Documentation". Unfortunately, Kao Lee, Media/IT Assistant, never received any requests for additional documentation. St. Paul City School respectfully requests that you reconsider and approve FRN 2376484 and 2376731.

In support of this appeal, I enclose the following:

Internal Coulding recived Photocopy of denial letter - wase Copies of Original 471's Copies of Original Attachments for Denied FRNs

Kasle

Thank you for your attention to this matter.

Kao Lee St. Paul City School St. Paul, MN

FCC Mail Froom

October 10, 2012

LETTER OF AGENCY CONCERNING E-RATE

(Universal Service Support Mechanism for Schools and Libraries, 47 C.F.R. Part 54)

To whom it may concern:

Please be advised that the St. Paul City School has retained Bryan Van Ruler, Dakota Academic Consulting, Inc. to serve as its consultant to prepare and file E-rate forms and other documents on behalf of the School. The School authorizes Bonnie Overweg to communicate with vendors, the Fund Administrator (the Schools and Libraries Division of the Universal Service Administrative Company) and anyone else with whom the Consultant needs to confer in order to provide E-rate consulting services. Bryan Van Ruler is authorized to act on behalf of the School for any and all funding year programmatic requirements for FY2013.

Any inquiries concerning this Letter of Agency should be directed to Kao Lee, 651-487-3888.

Title: Executive Desectore)

Dated: 22 October 2012



Decemen or Industries

Feb u5 2013

FCC Mail Room

TIME SENSITIVE MATERIAL

00472 Leonel Leon iLeontech 1114 Farrington St. St. Paul, MN 55117





FCB 05 2013

FCC Mall Room Schools and Libraries Division



FUNDING COMMITMENT DECISION LETTER (Funding Year 2012: 07/01/2012 - 06/30/2013)

October 30, 2012

Leonel Leon iLeontech 1114 Farrington St. St. Paul, MN 55117

Re: Service Provider Name: iLeontech

Service Provider Identification Number: 143035113

Thank you for participating in the Schools and Libraries Program (Program) for Funding Year 2012. This letter is your notification of our decision(s) regarding application funding requests that listed your company's Service Provider Identification Number (SPIN).

NEXT STEPS

- File Form 498, Service Provider Information Form, if appropriate - File Form 473, Service Provider Annual Certification Form (SPAC), for the above Funding Year

 Work with your customer to provide appropriate invoicing to USAC: Service Provider Invoice (Form 474) or Billed Entity Applicant Reimbursement (Form 472)

Please refer to the Funding Commitment Report(s) (Report) following this letter for specific funding request decisions and explanations. Each Report contains detailed information extracted from the applicant's Form 471. A guide that provides a definition for each line of the Report is available in the Reference Area of our website.

Once you have reviewed this letter, we urge you to contact your customers to establish any necessary arrangements regarding start of services, billing of discounts, and any other administrative details for implementation of discount services. As a reminder, only eligible services delivered in accordance with Federal Communications Commission (FCC) rules are eligible for these discounts.

TO APPEAL THIS DECISION:

You have the option of filing an appeal with the SLD or directly with the FCC.

If you wish to appeal a decision in this letter to USAC, your appeal must be received by USAC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. In your letter of appeal:

- 1. Include the name, address, telephone number, fax number, and (if available) email address for the person who can most readily discuss this appeal with us.
- State outright that your letter is an appeal. Include the following to identify the decision letter and the decision you are appealing:

Appellant name,

- Applicant or service provider name, if different from appellant,
 Applicant Billed Entity Number (BEN) and Service Provider Identification Number (SPIN),

- Form 471 Application Number as assigned by USAC,
 "Funding Commitment Decision Letter for Funding Year 2012," AND
- The exact text or the decision that you are appealing.
- 3. Please keep your letter to the point, and provide documentation to support your appeal.

Be sure to keep a copy of your entire appeal, including any correspondence and documentation.

- 4. If you are the applicant, please provide a copy of your appeal to the service provider(s) affected by the decision. If you are the service provider, please provide a copy of your appeal to the applicant(s) affected by USAC's decision.
- 5. Provide an authorized signature on your letter of appeal.

To submit your appeal to USAC by email, email to appeals@sl.universalservice.org. USAC will automatically reply to incoming emails to confirm receipt.

To submit your appeal to us by fax, fax your appeal to (973) 599-6542.

To submit your appeal to us on paper, send your appeal to:

Letter of Appeal Schools and Libraries Division - Correspondence Unit 30 Lanidex Plaza West PO Box 685 Parsippany, NJ 07054-0685

If you wish to appeal a decision in this letter to the FCC, you should refer to CC Docket No. 02-6 on the first page of your appeal to the FCC. Your appeal must be received by the FCC or postmarked within 60 days of the date of this letter. Failure to meet this requirement will result in automatic dismissal of your appeal. We strongly recommend that you use the electronic filing options described in the "Appeals Procedure" posted on our website. If you are submitting your appeal via United States Postal Service, send to: FCC, Office of the Secretary, 445 12th Street SW, Washington, DC 20554.

OBLIGATION TO PAY NON-DISCOUNT PORTION

Applicants are required to pay the non-discount portion of the cost of the products and/or services to their service provider(s). Service providers are required to bill applicants for the non-discount portion. The FCC stated that requiring applicants to pay their share ensures efficiency and accountability in the program. If USAC is being billed via the FCC Form 474, the service provider must bill the applicant at the same time it bills USAC. If USAC is being billed via the FCC Form 472, the applicant pays the service provider in full (the non-discount plus discount portion) and then seeks reimbursement from USAC. If you are using a trade-in as part of your non-discount portion, please refer to our website for more information.

NOTICE ON RULES AND FUNDS AVAILABILITY

Applicants' receipt of funding commitments is contingent on their compliance with all statutory, regulatory, and procedural requirements of the Schools and Libraries Program. Applicants who have received funding commitments continue to be subject to audits and other reviews that USAC and/or the FCC may undertake periodically to assure that funds that have been committed are being used in accordance with all such requirements. USAC may be required to reduce or cancel funding commitments that were not issued in accordance with such requirements, whether due to action or inaction, including but not limited to that by USAC, the applicant, or the service provider. USAC, and other appropriate authorities (including but not limited to the FCC), may pursue enforcement actions and other means of recourse to collect improperly disbursed funds. The timing of payment of invoices may also be affected by the availability of funds based on the amount of funds collected from contributing telecommunications companies.

Schools and Libraries Division Universal Service Administrative Company

FUNDING COMMITMENT REPORT Service Provider Name: iLeontech

SPIN: 143035113 Funding Year: 2012

Hereinen er meheeren FEB 65 2013

FCC Mail Room

Name of Billed Entity: ST PAUL CITY SCHOOL Billed Entity Address: 260 EDMUND AVENUE Billed Entity City: ST. PAUL Billed Entity State: MN Billed Entity Zip Code: 55103 Billed Entity Number: 220923 Contact Person's Name: Kao Lee Contact Person's Name: Kao Lee Preferred Mode of Contact: EMAIL

Contact Information: kao@stpaulcityschool.org

Form 471 Application Number: 855208 Funding Request Number: 2376484

Funding Status: Not Funded Category of Service: Basic Maintenance of Internal Connection Site Identifier: 27 00142 02721

Form 470 Application Number: 588100001017370

Contract Number: N/A

Billing Account Number: N/A Service Start Date: 07/01/2012

Contract Expiration Date: 06/30/2013

Number of Months Recurring Service Provided in Funding Year: 12 Annual Pre-Discount Amount for Eligible Recurring Charges: \$36,000.00 Annual Pre-Discount Amount for Eligible Non-Recurring Charges: \$.00

Pre-Discount Amount: \$36,000.00

Applicant's Discount Percentage Approved by SLD: 90% Funding Commitment Decision: \$.00 - Insufficient documentation

Funding Commitment Decision Explanation: Applicant has not provided sufficient documentation needed to determine the eligibility of the following item(s):

make/model of equipment being maintained.

FCDL Date: 10/30/2012 Wave Number: 017

Last Allowable Date for Delivery and Installation for Non-Recurring Services: 09/30/2013

Consultant Name: Bryan Van Ruler Consultant Number (CRN): 16062227

Consultant Employer: Dakota Academic Consulting



FCC Form 471

Approval by OMB 3060-0806

Schools and Libraries Universal Service Description of Services Ordered and Certification Form 471

Estimated Average Burden Hours per Response: 4 hours

This form is designed to help schools and libraries to list the eligible services they have ordered and estimate the annual charges for them so that the Fund Administrator can set aside sufficient support to reimburse providers for services.

Please read instructions before beginning this application. (You can also file online at www.usac.org/sl.)

The instructions include information on the deadlines for filing this application.

Applicant's Form Identifier (Create an identifier for your own reference)	Form 471 Application #:
1213.471BM	855208 (To be assigned by administrator)
Block 1: Billed Entity Address and Identifications	
1 Name of Billed Entity ST PAUL CITY SCHOOL	
2 Funding Year 2012	Kunowall & Indiables
3a Entity Number 220923	FEB 05 2013
3b FCC Registration Number 0011941150 4a Street Address, P.O. Box, or Route Number	FCC Mall Room
260 EDMUND AVENUE	1 00 Mas
City ST. PAUL State MN Zip Code 55103-	
4b Telephone Number (651) 225-9177	
4c Fax Number (651) 225-9722	
5a Type of Application (check only one) Individual School (individual public or non-public school) School District (LEA; public or non-public [e.g. diocesan] local district represe Consortion (including library system, library outlet/branch or library consorticned Consortium (intermediate service agencies, states, state networks, specion Statewide application for (enter 2-letter state code) representing (check all that apply) All public schools/districts in the state All non-public schools in the state All libraries in the state 5b Recipient(s) of Services: Private Public Charter Tribal Head Start State Agency Entity Number: 220923	um as defined under LSTA)
Contact Person: Kao Lee	Contact Phone Number: (651) 225-9177
Block 1: Billed Entity Address and Identifications (continued)	
6a Contact Person's Name Kao Lee	
If the Contact Person's Street Address is the same as Item 4 above, check here. First form 6b Street Address, P.O. Box, or Route Number NOTE: USAC will use this address to mail correspondence about this form. 260 EDMUND AVENUE City ST. PAUL State MN Zip Code 55103-	ot, complete Item 6b.
Check the box next to your preferred mode of contact and provide your contact informati 6c Telephone Number (651) 225 - 9177 6d Fax Number (651) 225 - 9722 6 E-Mail Address kao@stpaulcityschool.org	on. One box MUST be checked and an entry provided.
Re-enter E-mail Address kao@stpaulcityschool.org	

6f Holiday/vacation/summer contact information: please include name of alternate contact (if applicable) and alternate phone, fax or E-mail address

If a consultant is assisting you with your application process, please complete Item 6g below:

6g Consultant Name Bryan Van Ruler Name of Consultant's Employer Dakota Academic Consulting Consultant's Street Address 4608 S. WOODWIND LANE HERBIVER OF INSPERIEN

FEB 05 2013

City SIOUX FALLS State SD Zip Code 57103
Consultant's Telephone Number (651) 414-9562 Ext.
Consultant's Fax Number (612) 424-8350

Consultant's E-mail Address bryan@dakotaacademic.com Re-enter E-mail Address bryan@dakotaacademic.com

Consultant Registration Number 16062227

FCC Mall Room

Entity Number: 220923	Applicant's Form Identifier: 1213.471BM
Contact Person: Kao Lee	Contact Phone Number: (651) 225-9177

Complete this information on EVERY Form 471 you file for the services requested on that form. Please complete all rows that apply to services for which you are re discounts.

Schools/school districts complete the left-hand column and libraries complete the right-hand column. Consortia complete all that apply.

		Schools	Libraries
7a Number of students	or patrons to be served	346	0
b Telephone service: I phone service	Number of classrooms or rooms with	36	0
c Direct connections to	the Internet: Number of drops	64	0
d Number of classroom	ns or rooms with Internet access	36	0
e Number of computer	s or other devices with Internet access	130	0
f Number of dial-up Internet access and other connections of up to 200 kbps:		0	0
High-speed Internet	At or greater than 200 kbps and less than 1.5 mbps	0	0
access services; Number of buildings	At or greater than 1.5 mbps and less than 3 mbps	0	0
served at the following speeds o (please use	At or greater than 3 mbps and less than 10 mbps	0	0
g (please use advertised dow nload speed coming into building,	At or greater than 10 mbps and less than 25 mbps	2	0
not actual speed in classroom or w ork	At or greater than 25 mbps and less than 50 mbps		0
area):	At or greater than 50 mbps and less than 100 mbps	0	0

1	ļ ···-p						
	Greater than 100 mbps	0	0				
Block 3:							
8 [Reserved]							

Received & inspected EEB 02 \$013

Entity Number: 220923	Applicant's Form Identifier: 1213.471BM
Contact Person: Kao Lee	Contact Phone Number: (651) 225-9177

Block 4: Discount Calculation Worksheet

Worksh€ Paş

The Block 4 worksheet is used to calculate your discount for services. You will complete one or more worksheets depending on the type of application you are filing more than one worksheet, please number the completed worksheets to assure that they are all processed correctly. Please refer to the instructions for information the Type of Application you indicated in Block 1, Item 5.

Check here if this worksheet contains all eligible entities in the school district or library system.

1	2	3	4	5_	6	7_	8	9_	10	11_	12	13	14
Name of Eligible Entity	Entity Number AND NCES Code (for Schools) or FSCS Code (for Libranes)	Urban or Rural U or R	Total Number of Students	Number of Students Eligible for NSLP	Percent of Students Eligible for NSLP (Col. 5 / Col. 4)	Disc. from Disc. Matrix	New Cons tructi on	Admin Entity or NIF	Alt Disc Mech	for Calculating Shared Discount	Insert appropriate codes(s): P= pre- K, H = Head Start, A = Adult Education, J = Juvenile Justicem E = ESA, D = Dormatory	Entity Number of School District in which Library Outlet/Branch is Located	Discou Mem Enti
ALL EN	NTITIES			S	CHOOLS AND LIB	RARIES				Schools with shared services	Schools	Library Outlet/Branch	Const
ST PAUL CITY SCHOOL	220923	U	332	315	94.880%	90	N	N	N	29880			
9b Shared Services	3												
SCHOOL DISTRIC schools within sch totals of Columns Column 11 by the t result in Column 1	ool districts.) Calcu 4 and 11. Divide the otal of Column 4. E	late the total o	332							29880			
LIBRARY SYSTEM Column 7. Divide tl outlets/branches. E 15.	•	ber of											
14. Divide this total	ulate the total of Co by the number of mesult in Column 15	nembe	r										

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LFB 87 \$019

Beceived & Habethen

Entity Number: 220923	Applicant's Form Identifier: 1213.471BM
Contact Person: Kao Lee	Contact Phone Number: (651) 225-9177
Block 5: Discount Funding Request(s)	Block 5, page 1 of 1
Instructions: Use one Block 5 page for EACH service (Fundi	ng Request Number) for which you are requesting
discounts. Make as many copies of this page as needed, an	d number the completed pages to assure that FRN 2376484
they are all processed correctly.	(to be assigned by administrator)

etc.), check this box and enter the original FRN in the space pro	ovided:				
11 Category of Service (only ONE category should be checked)		23	Calculations		
PRIORITY 1 PRIORITY 2 Telecommunications Service Internal Connections Other than B	asic Maintenance		A. Monthly charges (total ametimt per month for service)		
Internet Access F Basic Maintenance of Internal Con	nections		\$3,000.00		
12 Form 470 Application Number			B. How much of the amount in A is ineligible?		
588100001017370 13 SPIN – Service Provider Identification Number			\$0.00		
		Recurring	C. Eligible monthly pre-discount amount (A minus B)		
143035113 14 Service Provider Name		Charges	,		
			\$3,000.00		
iLeontech			D. Number of months service provided in funding year		
15a Check this boxif this Funding Request is for non-contracted	tariffed or month-		12		
to-month services.			E. Annual pre-discount amount for eligible recurring charge		
15b Contract Number			\$36,000.00		
N/A 15c Check this boxif this Funding Request is covered under a m	aster contract (a		F. Annual non-recurring charges		
contract negotiated by a third party, the terms and conditions of which ar	e then made		\$0.00		
available to an eligible entity that purchases directly from the service pro			G. How much of the amount in F is ineligible?		
previous funding year based on a multi-year contract. If so, provide that i	FRN here:		a riow induit of the amount in r is mengione?		
16a Billing Account Number (e.g., billed telephone number)		Non- Recurring	\$0.00		
N/A 16b Check this boxif there are multiple Billing Account Numbers	and attach a	Charges			
complete list of those numbers to this page.			H. Annual eligible pre-discount amount for non-recurring c		
17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing)			minus G)		
03/06/2012			\$0.00		
18 Contract Award Date (mm/dd/yyyy) 03/06/2012					
19 Service Start Date (mm/dd/yyyy) 07/01/2012			I. Total funding year pre-discount amount (E + H)		
20a Service End Date (mm/dd/yyyy)		Total Charges	\$36,000.00		
Contract Expiration Date		Onargoo	J. Discount from Block 4 Worksheet 90.00		
20b (mm/dd/yyyy) 06/30/2013			K. Funding Commitment Request (I x J) \$32,400.00		
21 Description of This Service: NOTE: All Item 21 Attachments mus					
You MUST attach a description of the service, including a breakdown of the service including a breakdown					
Collimber and hote பிற்கா in space provided.			Number: (651) 225-9177		
			provided to one site the Entity Number of		
	ne entity from Block				
24 I certify that the entities listed in Block 4 of this application are	b. If the service is shared by all entities on a Block 4				
a ✓ schools under the statutory definitions of elementary and s					
7801(18) and (38), that do not operate as for-profit busines	sses and do not hav	ve endowm	ents exceeding \$50 million; and/or		
b I libraries or library consortia eligible for assistance from a Act of 1996 that do not operate as for-profit businesses an limited to, elementary, secondary schools, colleges, or uni	d whose budgets a				
I certify that the entity I represent or the entities listed on this ap resources, including computers, training, software, internal con purchased effectively. I recognize that some of the aforementior the entities listed on this application have secured access to all which access has been secured in the current funding year. I can and services to the service provider(s).	mections, maintena ned resources are n I of the resources to	nce, and el- not eligible f paythe dis	ectrical capacity, necessary to use the services or support. I certify that the entities I represent or counted charges for eligible services from funds to		
a Total funding year pre-discount amount on this Form 471 (Add the entries from Items 23I on all Block 5 Discount Funding Red	guests.)		36000		

you in locating funds in Item 25e.

,,,	OONO 471 Application		Received & Inspected		
b	Total funding commitment request amount on this Form 471 (Add the entries from Items 23K on all Block 5 Discount Funding Requests.)	32400			
c	Total applicant non-discount share (Subtract Item 25b from Item 25a.)	3600	FEB 0.3 2013		
d	Total budgeted amount allocated to resources not eligible for E-rate support	11400	FCC Mail Room		
e	Total amount necessary for the applicant to pay the non-discount share of the services requested on this application AND to secure access to the resources necessary to make effective use of the discounts. (Add Items 25c and 25d.)	15000			
f	Check this boxif you are receiving any of the funds in Item 25e directly from a service Billed Entity for this funding year, or if a service provider listed on any of the Forms 471	•	•		

- I certify that, if required by Commission rules, all of the individual schools and libraries receiving services under this form are covered by technology plans that do or will cover all 12 months of the funding year, and that have been or will be approved by a state or other authorized body or an SLD-certified technology plan approver prior to the commencement of service.
 - Or I certify that no technology plan is required by Commission rules.
- 27 🔽 I certify that (if applicable) I posted my Form 470 and (if applicable) made any related RFP available for at least 28 days before considering all bids received and selecting a service provider. I certify that all bids submitted were carefully considered and the most cost-effective service offering was selected, with price being the primary factor considered, and is the most cost-effective means of meeting educational needs and technology plan
- 28 F I certify that the entity responsible for selecting the service provider(s) has reviewed all applicable FCC, state, and local procurement/competitive bidding requirements and that the entity or entities listed on this application have complied with them.
- 29 🔽 I certify that the services the applicant purchases at discounts provided by 47 U.S.C. § 254 will be used primarily for educational purposes and will not be sold, resold or transferred in consideration for money or any other thing of value, except as permitted by the Commission's rules at 47 C.F.R. §§ 54.500, 54.513. Additionally, I certify that the entity or entities listed on this application have not received anything of value or a promise of anything of value, other than services and equipment sought by means of this form, from the service provider, or any representative or agent thereof or any consultant in connection with this request for services.
- 30 🔽 I certify that I and the entity(ies) I represent have complied with all program rules and I acknowledge that failure to do so may result in denial of

discount funding and/or cancellation of funding commitments. There are signed contracts covering all of the services listed on this Form 471 except for those services provided under non-contracted tariffed or month-to-month arrangements. I acknowledge that failure to comply with program rules could result in civil or criminal prosecution by the appropriate law enforcement authorities.

FCC Mall Room

Entity !	lumber: 220923	Applicant's Form Identifier: 1213.471BM					
Contac	t Person: Kao Lee	Contact Phone Number: (651) 225-9177					
Block	6: Certification and Signature (Continued)						
31 F	I acknowledge that the discount level used for shared services is conditional and libraries that are treated as sharing in the service, receive an appropriate						
32 √	I certify that I will retain required documents for a period of at least five years after the last day of service delivered. I certify that I will retain all documents necessary to demonstrate compliance with the statute and Commission rules regarding the application for, receipt of, and delivery of services receiving schools and libraries discounts, and that if audited, I will make such records available to the Administrator. I acknowledge that I may be audited pursuant to participation in the schools and libraries program.						
33 F	I certify that I am authorized to order telecommunications and other supporte that I am authorized to submit this request on behalf of the eligible entity(ies) the information on this form is true and correct to the best of my knowledge, the have complied with the terms, conditions and purposes of the program, that reform can be punished by fine or forfeiture under the Communications Act, 47 United States Code, 18 U.S.C. § 1001 and civil violations of the False Claims	listed on this application, that I have examined this request, that all of that the entities that are receiving discounts pursuant to this application no kickbacks were paid to anyone and that false statements on this 'U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the					
34 F	I acknowledge that FCC rules provide that persons who have been convicted their participation in the schools and libraries support mechanism are subject reasonable measures to be informed, and will notify USAC should I be inform application, or any person associated in any way with my entity and/or the entitled civilly liable for acts arising from their participation in the schools and library.	ect to suspension and debarment from the program. I will institute med or become aware that I or any of the entities listed on this tities listed on this application, is convicted of a criminal violation or					
35 F	I certify that if any of the Funding Requests on this Form 471 are for discount components, that I have allocated the eligible and ineligible components as r § 54.504(g)(1), (2).						
36 F	I certify that this funding request does not constitute a request for internal corthe Commission requirement that eligible entities are not eligible for such su Commission's rules at 47 C.F.R. § 54.506(c).						
37 K	I certify that the non-discount portion of the costs for eligible services will not services featured on this Form 471 are net of any rebates or discounts offerer rule, the provision, by the provider of a supported service, of free services or prebate of some or all of the cost of the supported services.	ed by the service provider. I acknowledge that, for the purpose of this					
38	Signature of authorized person	39 Date					
40	Printed name of authorized person Kao Lee						
41	Title or position of authorized person Media/IT Assistant						
	Check here if the consultant in Item 6g is the Authorized Person.						
42a	Street Address, P.O. Box, or Route Number 260 Edmund Avenue						
	City St. Paul State MN Zip Code 55103-						

Entity Number: 220923 Applicant's Form Identifier: 1213.471BM Contact Phone Number: (651) 225-9177 Contact Person: Kao Lee Ext. Telephone Number of authorized Received & Hopepled (651) 487-3888 Person FKH 55 2013 42c Fax Number of Authorized Person (651) 225-9722 FCC Mall Room 42d E-mail Address of authorized Person kao@stpaulcityschool.org Re-enter E-mail Address kao@stpaulcityschool.org

42e Name of Authorized

Person's Employer St. Paul City School

NOTICE: Section 54.504 of the Federal Communications Commission's rules requires all schools and libraries ordering services that are eligible for and seeking universal service discounts to file this Services Ordered and Certification Form (FCC Form 471) with the Universal Service Administrator. 47 C.F.R.§ 54.504(c). The collection of information stems from the Commission's authority under Section 254 of the Communications Act of 1934, as amended. 47 U.S.C. § 254. The data in the report will be used to ensure that schools and libraries comply with the competitive bidding requirement contained in 47C.F.R. § 54.504. All schools and libraries planning to order services eligible for universal service discounts must file this form themselves or as part of a consortium.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the information we request in this form. We will use the information you provide to determine whether approving this application is in the public interest. If we believe there may be a violation or a potential violation of any applicable statute, regulation, rule or order, your application may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing, or implementing the statute, rule, regulation or order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government is a party of a proceeding before the body or has an interest in the proceeding. In addition, consistent with the Communications Act of 1934, FCC regulations and orders, the Freedom of Information Act, 5 U.S.C. § 552, or other applicable law, information provided in or submitted with this form or in response to subsequent inquiries may be disclosed to the public.

If you owe a past due debt to the Federal government, the information you proclearly losed to the Department of the Treasury Financial Management Service, other Federal agencies and/or your employer to offset Close Print Preview and or other payments to collect that debt. The FCC may also provide the information to these agencies through the matching of computer Previous en authorized.

If you do not provide the information we request on the form, the FCC may delay processing of your application or may return your application without action.

The foregoing Notice is required by the Paperwork Reduction Act of 1995 🖰 ขึ้นเกีย ที่จำกับ 4-15, 44 บีเร. C. 😵 350 ปี et ségit 🦋 💮 💮

Public reporting burden for this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing, and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the reporting burden to the Federal Communications Commission, Performance Evaluation and Records Management, Washington, DC 20554.

Please submit this form to:

SLD-Form 471 P.O. Box 7026

Lawrence, Kansas 66044-7026

For express delivery services or U.S. Postal Service, Return Receipt Requested, mail this form to:

SLD Forms ATTN: SLD Form 471 3833 Greenway Drive Lawrence, Kansas 66046 (888) 203-8100

FCC Form 471 -

FEB Q 5 2013

FCC Mall Room

Item 21 Attachment

Applicant:ST Paul City School

Attachment:b1

Form 471 Application #:855208

FRN #:2376484

Billed Entity Number:220923

Provider:iLeontech

Narrative Description:basic maintenance of internal connections

Quantity	Product or Service Description	Unit Cost	Extended Pre-Discount Cost		
			Recurring	Non-Recurring	
12	Basic maintenance of internal connections		3000		
			26000 00		
		Total:	36000.00		

Additional Information:

FCC Form 471

Approval by OMB 3060-0808 mobi chig

Schools and Libraries Universal Service Description of Services Ordered and Certification Form 471

FEB 05 2013

Estimated Average Burden Hours per Response: 4 hours

This form is designed to help schools and libraries to list the eligible services they have ordered and estimate in Cambual Charges for them so that the Fund Administrator can set aside sufficient support to the charges for them. Please read instructions before beginning this application. (You can also file online at www.usac.org/sl.)

Applicant's Form Identifier (Create an identifier for your own reference)	Form 471 Application #:				
1213.471IC	855209 (To be assigned by administrator)				
Block 1: Billed Entity Address and Identifications					
1 Name of Billed Entity ST PAUL CITY SCHOOL					
2 Funding Year 2012					
3a Entity Number 220923					
3b FCC Registration Number 0011941150					
4a Street Address, P.O. Box, or Route Number 260 EDMUND AVENUE					
City ST. PAUL State MN Zip Code 55103-					
4b Telephone Number (651) 225-9177					
4c Fax Number (651) 225-9722					
5a Type of Application (check only one) Individual School (individual public or non-public school) School District (LEA; public or non-public [e.g. diocesan] local district representing Library (including library system, library outlet/branch or library consortium) Consortium (intermediate service agencies, states, state networks, special consortium) Statewide application for (enter 2-letter state code) representing (check all that apply) All public schools/districts in the state All non-public schools in the state All libraries in the state Statewide application for (enter 2-letter state code) representing (check all that apply) All public schools/districts in the state All libraries in the state Statewide application for (enter 2-letter state code) representing (check all that apply) All public schools in the state All libraries in the state	as defined under LSTA) onsortia of schools and/or libraries)				
	pplicant's Form Identifier: 1213.471IC ontact Phone Number: (651) 225-9177				
Block 1: Billed Entity Address and Identifications (continued)	The state of the s				
6a Contact Person's Name Kao Lee					
If the Contact Person's Street Address is the same as Item 4 above, check here. Fif not,	complete Item 6b.				
6b Street Address, P.O. Box, or Route Number NOTE: USAC will use this address to mail correspondence about this form. 260 EDMUND AVENUE					
City ST. PAUL State MN Zip Code 55103-					
Check the box next to your preferred mode of contact and provide your contact information.	One box MUST be checked and an entry provided.				
□ 6c Telephone Number (651) 225 - 9177 □ 6d Fax Number (651) 225 - 9722 □ 6e E-Mail Address kao@stpaulcityschool.org Re-enter E-mail Address kao@stpaulcityschool.org					

6f Holiday/vacation/summer contact information: please include name of alternate contact (if applicable) and alternate phone, fax or E-mail address

If a consultant is assisting you with your application process, please complete Item 6g below:

bryan@dakotaacademic.com

6g Consultant Name Bryan Van Ruler Name of Consultant's Employer Dakota Academic Consulting Consultant's Street Address 4608 S. WOODWIND LANE

City SIOUX FALLS State SD Zip Code 57103
Consultant's Telephone Number (651) 414-9562 Ext.
Consultant's Fax Number (612) 424-8350
Consultant's E-mail Address bryan@dakotaacademic.com

Consultant Registration Number 16062227

Re-enter E-mail Address

Received & Inspecteu

FEB 05 2013

FCC Mail From

Entity Number: 220923	Applicant's Form Identifier: 1213.471IC				
Contact Person: Kao Lee	Contact Phone Number: (651) 225-	9177			
Complete this information on EVERY Form 471 you file for the services req discounts.	uested on that form. Please complete all rows tha	it apply to services for which you are re			
Schools/school districts complete the left-hand column and libraries co	mplete the right-hand column. Consortia comple	ete all that apply.			
Block 2: Impact of Services Ordered for Schools and Libraries from this	Form 471				
	Schools	Libraries			

Block 2: Impact of Services Ordered for Schools and Libraries from this Form 471						
			Schools	Libraries		
7a	Number of students	or patrons to be served	346	0		
b	Telephone service: I phone service	Number of classrooms or rooms with	36	0		
С	Direct connections to	the Internet: Number of drops	64	0		
d	Number of classroor	ns or rooms with Internet access	36	0		
е	Number of computer	s or other devices with Internet access	130	0		
f	Number of dial-up Int to 200 kbps:	ernet access and other connections of up	0	0		
	High-speed Internet	At or greater than 200 kbps and less than 1.5 mbps	0	0		
	access services: Number of buildings	At or greater than 1.5 mbps and less than 3 mbps	0	0		
	served at the follow ing speeds (please use advertised download speed coming into building,	At or greater than 3 mbps and less than 10 mbps	0	0		
		At or greater than 10 mbps and less than 25 mbps	2	0		
	not actual speed in classroom or w ork	At or greater than 25 mbps and less than 50 mbps	ľ	0		
	area):	At or greater than 50 mbps and less than 100 mbps	0	0		

	· · · · · · · · · · · · · · · · · · ·		L
	Greater than 100 mbps	0	0
Block 3:			
8 [Reserved]			

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FCC Mail Room

Entity Number: 220923	Applicant's Form Identifier: 1213.471IC
Contact Person: Kao Lee	Contact Phone Number: (651) 225-9177

Block 4: Discount Calculation Worksheet

Workshe

The Block 4 worksheet is used to calculate your discount for services. You will complete one or more worksheets depending on the type of application you are filing more than one worksheet, please number the completed worksheets to assure that they are all processed correctly. Please refer to the instructions for information the Type of Application you indicated in Block 1, Item 5.

Check here if this worksheet contains all eligible entities in the school district or library system.

9a List entities and calculate discount(s):

(For Admini:

ŀ	School District or L	ibrary Systen	n Name:
1	r	,	

School District or L	•	•									School Distri	ct or Library Syste	
1	2	3	4	5	6	7	8	9	10	11	12	13	14
Name of Eligible Entity	Entity Number AND NCES Code (for Schools) or FSCS Code (for Libranes)	Urban or Rural U or R	Total Number of Students	Number of Students Eligible for NSLP	Percent of Students Eligible for NSLP (Col. 5 / Col. 4)	Disc. from Disc. Matnx	New Cons tructi on	Admin Entity or NIF	Alt Disc	for Calculating Shared Discount	Insert appropriate codes(s) P= pre- K, H = Head Start, A = Adult Education, J = Juvenile Justicem E = ESA, D = Dormatory	Entity Number of School District in which Library Outlet/Branch is	Mem
ALL EN	ITITIES			S	CHOOLS AND LIB	RARIES				Schools with shared services	Schools	Library Outlet/Branch	Consc
ST PAUL CITY SCHOOL	220923	U	332	315	94.880%	90	N	N	N	29880			
9b Shared Services	3												
SCHOOL DISTRIC schools within sch totals of Columns Column 11 by the t result in Column 1	ool districts.) Calcu 4 and 11. Divide the otal of Column 4. E	late the total o	332							29880			

SCHOOL DISTRICTS: (Including groups of schools within school districts.) Calculate the totals of Columns 4 and 11. Divide the total of Column 11 by the total of Column 4. Enter the result in Column 15.	332				29880		
LIBRARY SYSTEMS: Calculate the total of Column 7. Divide this total by the number of outlets /branches. Enter the result in Column 15.							
CONSORTIA: Calculate the total of Column 14. Divide this total by the number of member entities. Enter the result in Column 15.							

Rejeiven a moherted

FEG Q 5 2013

FCC Mail Room

ntity Number: 220923 Applicant's Form Idea		tifier: 1213.471IC		
Contact Person: Kao Lee	Contact Phone Number: (651) 225-9177			
Block 5: Discount Funding Request(s)		Block 5, page 1 of 1		
Instructions: Use one Block 5 page for EACH service (Funding Request Number) for w	hich you are requesting	· -		
discounts. Make as many copies of this page as needed, and number the completed p	FRN 2376731			

¹⁰ If this is a duplicate Funding Request (e.g., of an FRN that is not yet approved, under appeal,

they are all processed correctly.

(to be assigned by administrator)

etc.), check this box and enter the original FRN in the space pro	ovided:	Marine Angle Announce	
11 Category of Service (only ONE category should be checked)		23	Calculations 上版 以 2013
PRIORITY 1 PRIORITY 2 Telecommunications Service Internal Connections Other than B			A. Monthly charges பிரித் அழியர் நடித்த நாரி (Por service)
I Internet Access I Basic Maintenance of Internal Cor 12 Form 470 Application Number	nections		\$0.00
		B. How much of the amount in A is ineligible?	
588100001017370 13 SPIN – Service Provider Identification Number		\$0.00	
143035469	Recurring		
14 Service Provider Name		Charges	
			\$0.00
Massack Cofficers Inc			D. Number of months service provided in funding year
Wasatch Software, Inc. 15a Check this boxif this Funding Request is for non-contracted	I tariffed or month-		12
to-month services.			E. Annual pre-discount amount for eligible recurring charge
15b Contract Number			\$0.00
N/A 15c Check this boxif this Funding Request is covered under a n	naster contract (a		F. Annual non-recurring charges
contract negotiated by a third party, the terms and conditions of which ar	re then made		\$22,014,22
available to an eligible entity that purchases directly from the service pro	an FRN from a		G. How much of the amount in F is ineligible?
previous funding year based on a multi-year contract. If so, provide that I 16a Billing Account Number (e.g., billed telephone number)	FRN here:		CONTROL OF THE AMOUNT IN THE HIGHER
		Non- Recurring	\$0.00
N/A 16b Check this box if there are multiple Billing Account Numbers	and attach a	Charges	
complete list of those numbers to this page.			H. Annual eligible pre-discount amount for non-recurring c
17 Allowable Vendor Selection/Contract Date (mm/dd/yyyy) (based on Form 470 filing)			minus G)
03/06/2012			\$22,014,22
18 Contract Award Date (mm/dd/yyyy) 03/19/2012			
19 Service Start Date (mm/dd/yyyy) 07/01/2012			I. Total funding year pre-discount amount (E + H)
20a Service End Date (mm/dd/yyyy)		Total Charges	\$22,014.22
Contract Expiration Date		Orlanges	J. Discount from Block 4 Worksheet 90.00
20b (mm/dd/yyy) 06/30/2013			K. Funding Commitment Request (I x J) \$19,812.80
21 Description of This Service: NOTE: All Item 21 Attachments mur You MUST attach a description of the service, including a breakdown of			
Entry Nunabele 22092bilitional account or telephone numbers if the billed	·	·	
Collypper and note number in space provided.	Cor	ntact Phon	e Number: (651) 225-9177
II II		•	provided to one site he Entity Number of
Blook Grandinations and This Betwee:	he entity from Block	4 receiving	this service: 220923
24 🔽 I certify that the entities listed in Block 4 of this application are	o. If the service is shall be the service in the service in the service is shall be the service in the service in the service in the service is shall be the service in the service in the service in the service is shall be the service in the servi	ared by all জান্তেশহন শি	entities on a Block 4 ਅਜਲer (ලි.ję.ck)ene or both.)
a 🔽 schools under the statutory definitions of elementary and 7801(18) and (38), that do not operate as for-profit busines			
b Libraries or library consortia eligible for assistance from a Act of 1996 that do not operate as for-profit businesses an limited to, elementary, secondary schools, colleges, or uni	id whose budgets ai		
I certify that the entity I represent or the entities listed on this ap resources, including computers, training, software, internal compurchased effectively. I recognize that some of the aforemention the entities listed on this application have secured access to all which access has been secured in the current funding year. I count and services to the service provider(s).	nnections, maintena ned resources are n Il of the resources to	nce, and el ot eligible i paythe dis	lectrical capacity, necessary to use the services for support. I certify that the entities I represent or scounted charges for eligible services from funds to
Total funding year pre-discount amount on this Form 471 (Add the entries from Items 23I on all Block 5 Discount Funding Re-	quests.)		22014.22

	nmitment request amount on this Form 471 om Items 23K on all Block 5 Discount Funding Requests.)	19812.8	Received & inspected
c Total applicant no (Subtract Item 25)	on-discount share o from Item 25a.)	2201.42	FFR 0.5 2013
d Total budgeted a	mount allocated to resources not eligible for E-rate support	12798.58	
services requeste	essary for the applicant to pay the non-discount share of the d on this application AND to secure access to the resources e effective use of the discounts. (Add Items 25c and 25d.)	15000	FCC Mail Floom

- Check this boxif you are receiving any of the funds in Item 25e directly from a service provider listed on any of the Forms 471 filed by this Billed Entity for this funding year, or if a service provider listed on any of the Forms 471 filed by this Billed Entity for this funding year assisted you in locating funds in Item 25e.
- 26 I certify that, if required by Commission rules, all of the individual schools and libraries receiving services under this form are covered by technology plans that do or will cover all 12 months of the funding year, and that have been or will be approved by a state or other authorized body or an SLD-certified technology plan approver prior to the commencement of service.
 - Or I certify that no technology plan is required by Commission rules.
- I certify that (if applicable) I posted my Form 470 and (if applicable) made any related RFP available for at least 28 days before considering all bids received and selecting a service provider. I certify that all bids submitted were carefully considered and the most cost-effective service offering was selected, with price being the primary factor considered, and is the most cost-effective means of meeting educational needs and technology plan goals.
- 28 I certify that the entity responsible for selecting the service provider(s) has reviewed all applicable FCC, state, and local procurement/competitive bidding requirements and that the entity or entities listed on this application have complied with them.
- I certify that the services the applicant purchases at discounts provided by 47 U.S.C. § 254 will be used primarily for educational purposes and will not be sold, resold or transferred in consideration for money or any other thing of value, except as permitted by the Commission's rules at 47 C.F.R. §§ 54.500, 54.513. Additionally, I certify that the entity or entities listed on this application have not received anything of value or a promise of anything of value, other than services and equipment sought by means of this form, from the service provider, or any representative or agent thereof or any consultant in connection with this request for services.
- 30 🔽 I certify that I and the entity(ies) I represent have complied with all program rules and I acknowledge that failure to do so may result in denial of

discount funding and/or cancellation of funding commitments. There are signed contracts covering all of the services listed on this Form 471 except for those services provided under non-contracted tariffed or month-to-month arrangements. I acknowledge that failure to comply with program rules could result in civil or criminal prosecution by the appropriate law enforcement authorities.

Received & inspected

FEB G 5 2413

FCG Mail Room

Entity N	Number: 220923	Applicant's Form Identifier: 1213.471IC						
Contac	t Person: Kao Lee	Contact Phone Number: (651) 225-9177						
Block	6: Certification and Signature (Continued)							
31 🖟	I acknowledge that the discount level used for shared services is conditional, and libraries that are treated as sharing in the service, receive an appropriate s							
32 🄽	I certify that I will retain required documents for a period of at least five years after the last day of service delivered. I certify that I will retain all documents necessary to demonstrate compliance with the statute and Commission rules regarding the application for, receipt of, and delivery of services receiving schools and libraries discounts, and that if audited, I will make such records available to the Administrator. I acknowledge that I may be audited pursuant to participation in the schools and libraries program.							
33 🔽	I certify that I am authorized to order telecommunications and other supported that I am authorized to submit this request on behalf of the eligible entity(ies) list the information on this form is true and correct to the best of my knowledge, that have complied with the terms, conditions and purposes of the program, that no form can be punished by fine or forfeiture under the Communications Act, 47 U United States Code, 18 U.S.C. § 1001 and civil violations of the False Claims A	sted on this application, that I have examined this request, that all of at the entities that are receiving discounts pursuant to this application be kickbacks were paid to anyone and that false statements on this .S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the						
34 🔽	I acknowledge that FCC rules provide that persons who have been convicted their participation in the schools and libraries support mechanism are subject reasonable measures to be informed, and will notify USAC should I be informed application, or any person associated in any way with my entity and/or the entitional civilly liable for acts arising from their participation in the schools and libration.	to suspension and debarment from the program. I will institute ed or become aware that I or any of the entities listed on this es listed on this application, is convicted of a criminal violation or						
35 №	I certify that if any of the Funding Requests on this Form 471 are for discounts components, that I have allocated the eligible and ineligible components as re § 54.504(g)(1), (2).							
36 17	I certify that this funding request does not constitute a request for internal contribute Commission requirement that eligible entities are not eligible for such sup Commission's rules at 47 C.F.R. § 54.506(c).							
37 F	I certify that the non-discount portion of the costs for eligible services will not be services featured on this Form 471 are net of any rebates or discounts offered rule, the provision, by the provider of a supported service, of free services or provides of some or all of the cost of the supported services.	by the service provider. I acknowledge that, for the purpose of this						
38	Signature of authorized	39 Date						
	person							
40	Printed name of authorized person Kao Lee							
41	Title or position							
7'	of authorized							
	person Media/IT Assistant							
	Check here if the consultant in Item 6g is the Authorized Person.							
42a	Street Address, P.O. Box, or Route Number 260 Edmund Avenue							
	City St. Paul State MN Zip Code 55103-							

Entity Number: 220923 Applicant's Form Identifier: 1213.471IC Contact Person: Kao Lee Contact Phone Number: (651) 225-9177 Telephone Number Ext. of authorized (651) 487-3888 Person 42c Fax Number of Authorized Person (651) 225-9722 Received & Inspected 42d F-mail Address FEB 05 2013 of authorized Person kao@stpaulcityschool.org FCC Mail Room Re-enter E-mail Address kao@stpaulcityschool.org Name of Authorized 42e Person's Employer St. Paul City School

NOTICE: Section 54.504 of the Federal Communications Commission's rules requires all schools and libraries ordering services that are eligible for and seeking universal service discounts to file this Services Ordered and Certification Form (FCC Form 471) with the Universal Service Administrator. 47 C.F.R.§ 54.504(c). The collection of information stems from the Commission's authority under Section 254 of the Communications Act of 1934, as amended. 47 U.S.C. § 254. The data in the report will be used to ensure that schools and libraries comply with the competitive bidding requirement contained in 47C.F.R. § 54.504. All schools and libraries planning to order services eligible for universal service discounts must file this form themselves or as part of a consortium.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the information we request in this form. We will use the information you provide to determine whether approving this application is in the public interest. If we believe there may be a violation or a potential violation of any applicable statute, regulation, rule or order, your application may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing, or implementing the statute, rule, regulation or order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government is a party of a proceeding before the body or has an interest in the proceeding. In addition, consistent with the Communications Act of 1934, FCC regulations and orders, the Freedom of Information Act, 5 U.S.C. § 552, or other applicable law, information provided in or submitted with this form or in response to subsequent inquiries may be disclosed to the public.

If you owe a past due debt to the Federal government, the information you proclearly losed to the Department of the Treasury Financial

Management Service, other Federal agencies and/or your employer to offset Close Print Preview and or other payments to collect that debt. The FCC may also provide the information to these agencies through the matching of computer Previous en authorized.

If you do not provide the information we request on the form, the FCC may delay processing of your application or may return your application without action.

The foregoing Notice is required by the Paperwork Reduction Act of 1995, Phib. L. No. 154-13, 44 U.S.C. § 3501, et sequence

Public reporting burden for this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing, and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the reporting burden to the Federal Communications Commission, Performance Evaluation and Records Management, Washington, DC 20554.

Please submit this form to:

SLD-Form 471 P.O. Box 7026 Lawrence, Kansas 66044-7026

For express delivery services or U.S. Postal Service, Return Receipt Requested, mail this form to:

SLD Forms ATTN: SLD Form 471 3833 Greenway Drive Lawrence, Kansas 66046 (888) 203-8100

FCC Form 471 -

FEQ 05 2013

FCC Mail Heom

Item 21 Attachment

Applicant:ST Paul City School

Attachment:c1

Form 471 Application #:855209

FRN #:2376731

Billed Entity Number:220923 Provider: Wasatch Software

Narrative Description: internal connections

Quantity	Product or Service Description	Unit Cost	Extended Pre-Discount Cost			
Quality	Troduct of Service Sessiption		Recurring	Non-Recurring		
1	internal connections			22014.22		
		Total:		22014.22		
Additional In	ıformation:	<u> </u>				